APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention IMPROVED CATHETER BALLOON MOLD FORM AND MOLDING

PROCESS

Application Type:

regular, utility

Attorney Docket Number: S63.2-11346-US01

Correspondence address:

Customer Number:

490

490

Inventors Information:

Inventor 1:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Ken

Middle Name:

Xiao Kang

Family Name:

Zhang

City of Residence:

Maple Grove

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 16688 73rd Avenue

Address-2 of Mailing Address:

City of Mailing Address:

Maple Grove

State of Mailing Address:

MN

Postal Code of Mailing Address: 55311

Country of Mailing Address:

US

Phone:

Fax:

<u>-</u>	mail	:

Inventor 2:

Applicant Authority Type: Inventor

Citizenship: US

Given Name: Jeffrey

Middle Name: S.

Family Name: Lindquist

City of Residence: Maple Grove

State of Residence: MN

Country of Residence: US

Address-1 of Mailing Address: 8920 Zanzibar Lane

Address-2 of Mailing Address:

City of Mailing Address: Maple Grove

State of Mailing Address: MN

Postal Code of Mailing Address: 55311

Country of Mailing Address: US

Phone:

Fax:

E-mail:

Inventor 3:

Applicant Authority Type: Inventor

Citizenship: US

Given Name: Victor

Middle Name: L.

Family Name: Schoenle

City of Residence: Greenfield

State of Residence: MN

Country of Residence: US

Address-1 of Mailing Address: 9125 Pioneer Trail

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City of Mailing Address:	Greenfield
State of Mailing Address:	MN
Postal Code of Mailing Address:	55357
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 4:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	Scott
Family Name:	Schewe
City of Residence:	Eden Prairie
State of Residence:	MN
Country of Residence:	US
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Address-2 of Mailing Address:	
City of Mailing Address:	Eden Prairie
State of Mailing Address:	MN
Postal Code of Mailing Address:	55346
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 5:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	David

Family Name: **Parsons** City of Residence: Princeton State of Residence: MN Country of Residence: US Address-1 of Mailing Address: 30621 147th Street Address-2 of Mailing Address: **City of Mailing Address:** Princeton State of Mailing Address: MN Postal Code of Mailing Address: 55371 Country of Mailing Address: US Phone: Fax: E-mail: Inventor 6:

Applicant Authority Type: Inventor

Citizenship: US

Given Name: Nao

Family Name: Lee

City of Residence: Brooklyn Park

State of Residence: MN

Country of Residence: US

Address-1 of Mailing Address: 2816 81st Avenue North

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City of Mailing Address: **Brooklyn Park**

State of Mailing Address: MN

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E-mail:

Inventor 7:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Ying

Family Name:

Xiong

City of Residence:

St. Paul

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 1595 Carroll Avenue

Address-2 of Mailing Address:

City of Mailing Address:

St. Paul

State of Mailing Address:

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Postal Code of Mailing Address: 55104-5307

Country of Mailing Address:

US

Phone:

Fax:

E-mail:

Attorney Information:

Name	Registration Number
Mr. Walter J. Steinkraus	29592

Assignee 1:

Organization Name:

Scimed Life Systems, Inc.

Address-1 of Mailing Address: One Scimed Place

Address-2 of Mailing Address:

City of Mailing Address:

Maple Grove

State of Mailing Address:

MN

Postal Code of Mailing Address: 55311

Country of Mailing Address:	US	
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Fax:		
E-mail:		